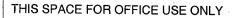


HAWAII STATE ETHICS COMMISSION

1001 BISHOP STREET, PACIFIC TOWER 970 P.O. BOX 616, HONOLULU, HAWAII 96809 TEL: 587-0460 FAX: 587-0470

email: ethics@hawaiiethics.org



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STATE OF HAWAII STATE ETHICS COMMISSION

LOBBYIST REGISTRATION FORM

	(Type or F	rint Clearly)			
PART I LOBBYIST					
NAME(Last)	(First)	(Middle)	TELEPHONE		
Tsujimura	Rick	,	521-9500		
MAILING ADDRESS (Street)			FAX		
MAILING ADDRESS (Street) 745 Fort Street Mall, 17 th Floor			541-9050		
(City)	(State)	(Zip (Zip Code)		
Honolulu	Hawaii		96813		
EMPLOYING ORGANIZATION (Fill in only if you N/A	TELEPHONE				
MAILING ADDRESS (Street)			FAX		
(City)	(State)	(Zip (Code)		

PART II ORGANIZATION			
W. W. Grainger, Inc.			(847) 535-5100
MAILING ADDRESS (Street)			FAX:
100 Grainger Parkway			(847) 535-4585
			,
(City)	(State)	(Zip C	ode)
Lake Forest	Illinois	60045-520	1
NAME OF PERSON RESPONSIBLE FOR PREPARING	ORGANIZATION'S EXPENDITURES STA	TEMENT	TELEPHONE
Katherine Nee, Esq.			(847) 535-1056
MAILING ADDRESS (Street)			
(Same as above)			FAX (847) 535-9243
			, ,
(City)	(State)	(Zip C	Code)
			1

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY									
	III DESCRIPTION	OF SC	IBJECTS OPON WHIC	ים אים	DEXPECT TO LOBBY				
[]	Agriculture	[]	Education	[]	Human Services	[]	Science, Technology &		
[]	Communications &	[X]	Government Operations & Finance	r 1	Internation of Deletion		Economic Development		
rva	Public Utilities	[]	Hawaiian Affairs	[]	Intergovernmental Relations International Affairs	s, []	Tourism & Recreation		
[X]	Consumer Protection & Commerce		, and and the second	[]	Labor & Employment	[]	Transportation		
[]	Culture, Arts, Historic Preservation	.[]	Health	[]	Planning, Land & Water Use Management	[]	Other: (indicate below)		
[]	Ecology, Energy Environmental Protection	[]	Housing	[]	Public Safety & Corrections				
1									
PAR		ON OF	LOBBYIST						
	I hereby coffify that it	e inforr	nation furnished above	is, to t	he best of my knowled	ge, corre	ct and complete.		
	Il I m.	S			•				
		9	(Cignotus of Laborita)				<u>3/31/03</u>		
		- #	(Signature of Lobbyist)				(Date)		
PAR	T V AUTHORIZATI	ON TO	LORRY						
NAME	·	011 10	LODDI	TIT	LE OF AUTHORIZING OFF	ICER OR E	PERSON REDRESENTED		
					LE OF MOTHORIZING OFF	IOLII OITI	LI TOON TIEL TIEGENTED		
Kath	erine L. Nee, Esq., A	Associa	ate General Counsel						
NAME	OF ORGANIZATION (if a	plicable			:	TELEPHO	NE		
 ,,					<u> </u>	(847) 5	35-1056		
VV. V 	V. Grainger, Inc.				**************************************	(0 11) 0			
MAILI	NG ADDRESS (Street)	MAILING ADDRESS (Street)							
100	Grainger Parkway					(847) 5	35-9243		
	(City)		(State)		(Zip C	ode)	35-9243		
			(State) Illinois		(Zip C 60045-520	ode)	35-9243		
	(City)	Paboye	Ìllinois	gage in		ode) 1			
	(City) Forest	vaboya Wei	Illinois - named person to eng	gage in	60045-520	ode) 1			